
DC Fire & EMS Special Operations: Cyanide Antidote Package



Note Well: *This protocol is to be used for known or strongly suspected cyanide poisonings. Please note that this guideline is different from the smoke inhalation protocol.*

I. Background

1. Cyanide is a cellular toxin; it halts respiration at the cellular level. Cyanide poisoning may be encountered in industrial areas such as electroplating facilities and metal refining facilities. It may be found in photography studios both large scale and private dark rooms. Cyanide may also be found in university laboratory facilities. This may be a common method of suicide attempt in those who have access to the substance, such as laboratory workers and chemists.



II. Scene Size-up

1. As with any situation the first priority is personal safety. Scene size up, personal protective equipment and decontamination are necessary.
2. Avoid contact with vomitus.

III. All Provider Levels

1. Remove the patient to a non-contaminated area.
2. Refer to the Patient Care Protocols.
3. Administer Oxygen at 100% via non-rebreather mask.
 - A. If the patient is not breathing, initiate advanced airway management with Combi-tube.

Note Well: *EMT-I and EMT-P should use ET intubation.*

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IV. Advanced Life Support Providers

1. Institute standard ALS measures as indicated.



Note Well: *Known cyanide ingestion (i.e. and unconscious individual near an open cyanide container in an apparent suicide attempt) **does not require Medical Control or Medical Director contact.***



In instances where cyanide poisoning is only suspected, contact the medical control hospital, or the medical director for on line medical direction.

2. Obtain IV access unless previously obtained.
3. Administer 50 cc of 25% Sodium Thiosulfate solution IV over ten minutes utilizing a 60 cc syringe.
4. Continue monitoring and transport.



V. Transport Decision

1. Transport to the nearest appropriate receiving facility.
2. Notify the receiving facility of incoming patient.



VI. The Following Options are Available by Medical Control Only

1. In instances where cyanide poisoning is only suspected, contact the medical control hospital, or the medical director for on line medical direction.
2. Repeat ½ dose if symptoms do not improve or reappear.
3. Pediatric Doseage: 0.25 mg/kg (1.2 ml/kg) to a maximum of 12.5 G over 10 minutes.

